General Information				
Lead Agency				
Project Name & Termini or Program				
Contact Person	Telephone Number			
Description of P	roposed Improvements			
Transportation Plan, and/or Transit Plan. This project must be approved Transportation Plan, and/or approved Transit Plan.	the current agency-approved Transportation Improvement Program and/or e included in the approved Transportation Improvement Program and/or below. How will it improve the existing conditions. If necessary, attach			

ΤI

В

		Proje	ct Cost Est	timate			
		When completing the Pro	ject Cost Estimate, round all fig	gures to the nearest dollar			
Predesign Phase (Complete only if Predesign Phase was approved by the TIB) Planning Environmental Study Design Study					Total Predesign Cost		
Design Phase Special Studies Contract Preparation		Right of Way/Land Purchase	Total Design Cost				
lm	onstruction/ plementation nase	Contract Amount ⁴	Other ²	Contract Administration	Total Construction Cost		
			Tota	al Project Cost			
D. E.	Use Local Matching Ratio page 3 for the entry on the The amount of the construction of the amount of the construction of the construction of the construction of the construction of the amount of the construction of the constru	o used in the grant application is line. Precion contract or vendor agroreakdown of contract items of the cont		increased, use the Local Maration, implementation, capit entation. ration) ter 0)	atch Funds determined from al construction, etc.		
F.	F. PTSA FUNDS (Total Project Cost - E)						
	G. PTSA FUNDS LISTED WHEN PROJECT WAS SELECTED FOR FUNDING						
H.	BALANCE (G-F) (S	urplus is +, Deficit is -)					

Design Phase Increase Worksheet

COMPLETE THIS FORM ONLY IF THE TOTAL PROJECT COST HAS INCREASED

	When completing the Increase worksheet, round all figures to the nea	rest dollar
A.	Application Total Project Cost	·
В.	Application Total PTSA Funds	
C.	Application PTSA Matching Ratio (B/A)	·
D.	Design Phase Total Project Cost	·
E.	Design Phase Total Eligible Project Cost	·
F.	Eligible Project Cost Increase (E-A)	·
G.	Eligible Project Percent Increase (F/A x 100)	
Н.	Increase Factor (1.0 - G/100) Minimum = 0.5	·
I.	Total Allowable PTSA Increase (CxFxH)	
J.	Total PTSA Funds (B+I)	
K.	Total Local Funds (D-J)	
L.	Local Matching Ratio (K/D)	·
M.	PTSA Matching Ratio (J/D)	·
	equest is submitted for an increase of \$ in ttach an explanation for the increase)	PTSA Funds
re	the increase in PTSA funds is more than \$300,000 or 10% at equested in the application, a TIB committee must review the increase proproval.	

Project Funding Analysis

- Round all figures to the nearest dollar
- Use actual Predesign Phase funds when calculating Estimated Total Project Cost
- Shaded Areas are for TIB Use Only

Predesign Phase Cost

	Planning PTSA Funds	Environmental Study PTSA Funds	Design Study PTSA Funds	Total Predesign PTSA Funds	Predesign Local Funds	Total Predesign Cost (PTSA & Local)
APPROVED						
ACTUAL REQUIRED						

Estimated Design Phase Cost

	Special Studies PTSA Funds	Contract Preparation PTSA Funds	Right of Way/Land Purchase	Total Design PTSA Funds	Design Local Funds	Total Design Cost (PTSA & Local)
ESTIMATED			PTSA Funds			

Estimated Construction/Implementation Phase Cost

	Construction Contract PTSA Funds	Construction Other PTSA Funds	Contract Administration PTSA Funds	Total Construction PTSA Funds	Construction Local Funds	Total Construction Cost
ESTIMATED						

Estimated Total Project Cost

	Total Predesign PTSA Funds	Total Design PTSA funds	Total Construction PTSA Funds	Total Project PTSA Funds	Total Local Funds	Total Project Cost (PTSA & Local)
ESTIMATED			1 TOTT and			

Local match is considered to be eligible in-kind contributions and all funds other than PTSA funds. The local matching ratio may not be less than that shown in the grant application. List all funding sources, private or public entity and the amount of funds pledged.

Source	Private or Public	Amount of Funds
TOTAL L	OCAL MATCHING FUNDS	\$
List all agencies and/o	or private groups involved in the project	. Describe their involvement.

Demand for PTSA Funds

List demand for PTSA Funds in six month increments. January through June, and July through December.

Time Period	Predesign	Design	Right of Way/ Land Purchase	Construction/ Implementation	Total PTSA Funds
Jan - June					
July - Dec					
Jan - June					
July - Dec					
Jan - June					
July - Dec					
Jan - June					
July - Dec					
Jan - June					
July - Dec					
Jan - June					
July - Dec					
Jan - June					
July - Dec					
Jan - June					
July - Dec					
Jan - June					
TOTAL					



Proposed Project Schedule

Provide the date the following the following tasks will be accomplished

Design Phase

vesign Phase	
TIB Design Phase Approval	Month/Year
Local and/or Private Funding Certification	Month/Year
Meeting with Utilities	Month/Year
Utility, Railroad and Interagency Agreements	Month/Year
Type of Environmental Involvement Required	Type
Value Engineering Study (if required)	Month/Year
Draft Environmental Document Circulated	Month/Year
Public Involvement Process	Month/Year
Final Environmental Document Circulated	Month/Year
Right of Way Plans Completed	Month/Year
Number of Parcels Involving Major Impact	Number
Number of Parcels Involving Major Impact	
	Number
Number of Parcels Involving Major Impact	Number Month/Year
Number of Parcels Involving Major Impact Parcel Negotiation Completed	Number Month/Year Month/Year
Number of Parcels Involving Major Impact	Number Month/Year Month/Year
Number of Parcels Involving Major Impact Parcel Negotiation Completed	Number Month/Year Month/Year Month/Year
Number of Parcels Involving Major Impact Parcel Negotiation Completed	Number Month/Year Month/Year Month/Year Month/Year
Number of Parcels Involving Major Impact Parcel Negotiation Completed Condemnation Ordinance (if needed) Right of Way Acquisition Completed Construction Phase TIB Construction Phase Approval	Number Month/Year Month/Year Month/Year Month/Year Month/Year

C

Agency Certification

Certification is hereby given that Local and/or Private Matching Funds and Other Funds associated with the Design Phase of the project are available to coordinate with the proposed project development.
☐ YES ☐ NO
Certification is hereby given that Local and/or Private Matching Funds and Other Funds associated with the Total Project are available to coordinate with the proposed project development.
☐ YES ☐ NO
Attach executed agreements with Joint Agencies and/or Private Sources for Projects that contain funding from sources other than the Lead Agency.
If Local Matching Funds cannot be certified at this time, the Lead Agency has one year after approval of this prospectus, to provide certification of the pledged Local and/or Private Funding.
If the project is within a non-attainment area, the Lead Agency certifies compliance with all requirements of the State and Federal Clean Air Acts.
All right of way and real property required for this project shall be acquired in accordance with WAC chapter 468-100
The Agency certifies that the project is consistent with Growth Management Act, High Capacity Transportation Act, Commute Trip Reduction Law, Transportation Demand Management Programs, Americans with Disabilities Act and Washington State Accessibility requirements, where applicable.
This Project has been reviewed by the Legislative Body of the Administering Agency or its designee, and is consistent with the Agency Comprehensive Plan for Community Development
Lead Agency
Signature of Mayor/Director Date Signed